#### County of Sullivan, NH

Type of meeting:

**Board of Commissioners Regular Business Meeting Minutes** 

Date / Time:

November 27, 2012; 3:00 PM

Place:

Unity, NH - Sullivan County Health Care, 1st Floor

Attendees: Commissioners Bennie Nelson – Chair (arrived later in the meeting), Jeffrey Barrette – Vice Chair and John Callum Jr. - Clerk, Greg Chanis – County Manager, Ted Purdy – Sullivan County Health Care (SCHC) Administrator, Lieutenant Joe Brookens - Department of Corrections, John Cressy – Facilities & Operations Director (arrived @ 3:04 p.m.), Sharon Callum – Administrative Assistant / Minute Taker.

**Public attendees:** Wendy Callum – Newport Citizen, Larry Converse – Claremont Citizen, Archie Mountain – Eagle, Times Staff Reporter / Argus Champion Editor, James Grenier – Lempster Citizen, Newly Elected State-County Delegate District 7, Andrew O'Hearn – Claremont Citizen / Newly Elected State – County Delegate District 3.

3:00 PM

The Vice Chair, Jeffrey Barrette, opened the meeting and led all in the *Pledge of Allegiance*.

Agenda Item No. 1. Sullivan County Health Care (SCHC) Administrator's Report, Ted Purdy

#### Agenda Item No. 1.a. Census

Mr. Purdy reviewed the following reports [Appendix A. 1-7]:

- October 2012 Medicare, Private, Medicaid, HCBC, Managed Care, Medicare B Revenue: Medicaid is under-budget, saw Managed Care patients in October and two (2) during November, therefore, have a positive variance; they are \$14,143 under budget in revenue; total variance for month \$9,354,
- Revenue Review thru 10/31/2012: Medicaid under budget, Medicaid Assessment came in less than expected: bed tax based on 5.5% of revenue, Medicare Part A under budget, net variance from operations is negative \$70,139; year-to-date negative variance of \$29,235. Comm. Barrette asked how money received from a suite appears on the County's books. Mr. Purdy and Chanis confirmed the debt, a non-payment of a nursing home resident account, is applied to the Accounts Receivables, while anything in addition i.e. court fees and interest are placed into the Miscellaneous Revenues,
- > Sullivan County Nursing Home Quarterly Resident Census: 136.4 average,
- Medicare Length of Stay Analysis: reflects a breakdown of revenue and they anticipate an improvement for November,
- ➤ Summary Admission / Discharge Report for 10/1/12 10/31/12: 12 admissions, 4 readmits, and 7 discharges, and
- ➤ Summary Admission / Discharge Report for 7/1/12 10/31/12: 27 admissions, 18 readmits, and 39 discharges.

#### Agenda Item No. 1.b. Staffing

No key positions open. A nurse manager will depart mid-December - will begin search for replacement.

#### Non Agenda Item

**Events** 

SCHC Thanksgiving dinner was held this past Tuesday – great weather, 130 family members and guest attended, the event was a success.

#### Agenda Item No. 2.

Department of Corrections (DOC) Superintendent's Report, Lieutenant

Joe Brookens provided report for Ross L. Cunningham

#### Agenda Item No. 2.a. Census

Mr. Chanis pointed out Supt. Cunningham was unable to make the meeting and Lieutenant Joe Brookens was here to go over the DOC inmate population statistics, in his place. Brookens distributed a copy of the "Daily Report" from Sergeant Coughlan dated 11/27/12 [Appendix B].

#### Non Agenda Item Operations

Jail Unit 1 is empty to complete the floor epoxy project; Unit 2 was emptied, also - this will be a three (3) day project; the project is going well.

#### Agenda Item No. 2.b. Staffing

They are down to four (4) FTE. Brookens does staff recruitments and has three (3) good applicants; another application coming in today; he feels comfortable they will fill the positions before the next cycle; recruits will then go through a six (6) week training; two (2) applicants have their certification, already.

#### Non Agenda Item

**Upcoming Events** 

DOC inmate's children holiday event is scheduled for December 20<sup>th</sup> - Jane Coplan is coordinating this event. Staff holiday event scheduled for December 18<sup>th</sup>.

#### Agenda Item No. 4. County Manager's Report, Greg Chanis

#### Agenda Item No. 4.a. Biomass Project Update

Woodard & Curran is finalizing site plans for placement of building and truck route and sharing preliminary equipment layouts.

#### Agenda Item No. 4.b. Public Health Regional Network Map Update

Network (substance abuse prevention) and Public Health Network (includes emergency preparedness, Medical Reserves Corp development, and public health outreach); Chanis provided copies of the proposed map [Appendix C] and what the two program maps looked like previously, the proposed map aligns with County lines, however, neither network map aligns with County lines [Appendix D.1-3]. The State has requested comments, in response to the proposal —responses required Friday. Chanis heard the towns of Wilmot, New London, Sutton, and Newbury - for the PHN - feel they should stay with Sullivan County, and, as far as the RN, the towns of Grantham and Plainfield would like to stay with Upper Valley as youths are fed into the Lebanon schools. How funding would be distributed and shown on the RFP coming out in January, is still a mystery, per Chanis. He understands the State clearly said they are not changing the proposed map, so, is unsure why they are requesting comments. A copy of the State's PowerPoint [Appendix E.1-17] was shared with the Commissioners, as well as an e-mail

from Ms. McAuliff, MPH [Appendix F.1.-3] regarding points of comments and concerns to the PH regional partners. Comm. Nelson noted for public participation, MOU's were done with Valley Regional Hospital for trailer sites and Mount Sunapee for an emergency management site. Chanis concurred this effects the PHN mostly and the question whether the County should remain fiscal agent if the County lines are not followed - due to soliciting support for towns outside the county borders. Chanis noted the PHN MRC has federal regions, which are essentially PHN regions. He knows that if the County advised they would discontinue being fiscal agent, it would be a big deal to the State.

#### Agenda Item No. 4. c. Colby Sawyer Internship

The County will be represented at the Colby Sawyer College March 6, 2013 *Internship Fair* by both Jessica McAuliff, MPH for the Public Health Network and representatives from the Communities United Regional Network.

#### Non Agenda Item <u>Facilities & Operation: Water Well</u>

Mr. Cressy indicated they are getting good quality water from the new well; they are 12 hours into a steady pump; monitoring will continue for two more nights - have meter and transponder to check status of the new well and neighboring wells; State is on site and happy; once test complete, will start engineering plans for connection and go forth with project in good weather; they experienced several cave-in issues at 100 to 120 feet down, therefor, sleeved the area.

#### Agenda Item No. 5. Commissioners' Report

#### Agenda Item No. 5.a. Old Business

- Conservation District Annual Award Meeting & Dinner 11/16/12 update:
   Commissioners and Manager attended the annual meeting; new Conservation District
   Director presented a nice slide show at the event about the history of the Conversation
   District; folks from the State and Federal offices, out of Walpole, attended; nice turn
   out: new Director is very enthusiastic and excited about working on County properties.
- <u>Springfield Town Meeting 11/14/12 update</u>: Commissioners attended; were first on the agenda; they provided a PowerPoint of the County budget, talked about the biomass project and answered questions; 8 to 10 public attended.
- A reminder was made that the Sullivan County <u>Delegation Orientation Day</u> is scheduled for December 11<sup>th</sup> in Unity.
- <u>Claremont Senior Congress</u> members attended a tour of the County's Unity Complex Sullivan County Health Care facility and the Community Corrections Center, Friday 11/16<sup>th</sup>; 12 to 14 members attended; the County passenger van was used to transport them from Claremont to Unity and back; the tour groups had a good time. Nelson requested they conduct the same type of event for Newport seniors.

#### Agenda Item No. 5.a. New Business

- West Central Behavioral Health Annual Legislative Forum invite for December 6, 2012 was distributed.
- II. Commissioners decided to consolidate December meetings into one on **12/18 3PM in Newport.**

- III. The Board requested the date for the next **Sullivan County Criminal Justice Coordinating Committee** be set sometime for the third week in January, after holidays.
- IV. Other new business: Comm. Barrette noted he spoke recently with Mr. McLaughlin, who owns the fields the **sewage line from the Unity Complex to Claremont** goes through and, in light of the conversation, would like the County to push to reopen discussions and approach the conversation with Claremont in a more proactive way. He noted there is significant soil erosion and the issue is becoming a liability. Chanis pointed out the issue is the responsibility of Claremont City. At this point Lionel Chute arrived (3:48). The group updated Mr. Chute on their discussions and the situation. Chanis confirmed he would start a plan of action with Chute and Barrette.
- V. Other new business: **formal land leases**. Nelson requested they formalize land leases. Chanis followed up, noting the County is allowing land use without a formal lease, or fee, for a couple situations and anticipates working with Mr. Chute on invigorating land use, deciding best use for each property.

#### Non Agenda Item NH State DOT Salt Shed, Unity County Property - Update

Mr. Cressy confirmed draft lease for NH State - to place and maintain the salt shed buildings on County property, which expired years ago - has been going back and forth; State cleaned up the yard, placed Jersey Barriers, but has done nothing to building; the biggest issue is liability. Nelson noted liability issues include contamination / pollution of salt from shed and Cressy added it also includes diesel fuels used. Barrette requested Cressy place this as priority.

### Agenda Item No. 3. S.C. Conservation District National Wild Turkey Federal Project at Marshal Pond Tract, *Lionel Chute*

Mr. Chute noted the Board approved, in 2010, - a Marshall Pond field wildlife habitat project for two (2) of three (3) fields, where they would plant small shrubs, such as, dogwoods, grapevines, and convert fields to later successional stage- shrub forest for wild turkey and other game species; Commissioners signed off, but they did not go for the grant money right away, they used Moose Money to plant shrubs – picked up bayberry, arrow wood, red-yellow-lee dogwood, at a State nursery to plant in 10x10 plots; the Fish & Game Biologist will send a map identifying shrub placement; proposal included exclusion fencing for deer - plastic weed barrier was used; he spoke to Tim Fleury who was surprised by the material used; he prompted the question for the Board, 'Where do you want to go from here?"; the proposal is based on fields not being mowed for 8-9 years vs. 3 years as they have been doing – a longer period between mowing's allows for shrubs to grow, creating the habitat they proposed, but this creates more of a challenge; he noted the Board, previously, only gave approval for shrub planting; he asked the biologist if a perimeter survey of plant habitat was conducted and discovered it had not been performed. Barrette wants more information before they rotate the fields, would like more input from Chute, and asked to schedule an inspection of the area in spring.

4:05 Wendy Callum left the room.

#### Agenda Item No. 6. Public Participation

Larry Converse noted that his concern with the sewage pipe line, was not so much erosion on the Sugar River, but erosion is getting deeper by the valve cone and not filling back in.

Jim Grenier noted a portion of his land is used for sustainable brambles - wildlife love it, turkeys and birds feed and hide in it; the question to ask is "What is the goal?" Barrette noted he's unsure. Chute discussed creating a 'feathered edge' to the field and get to the point where the dog wood is producing fruit. Nelson suggested they do that and brush hog the rest. The group concurred that a plan needed to be developed.

4:10 Andrew O'Hearn arrived.

Agenda Item No. 7. Meeting Minutes Review

Agenda item No. 7.a. Nov 13, 2012 Public Meeting Minutes

4:17 Motion: approve, as written, the November 13<sup>th</sup> 2012 public meeting minutes. Made by: Barrette. Seconded by: Callum Jr. Voice vote: All in favor.

Agenda item No. 7.b. Nov 13, 2012 4:00 PM Executive Session Meeting Minutes

4:17 Motion: to approve the Nov 13, 2012 4PM Executive Session Meeting Minutes, but to keep them sealed until the next meeting. Made by: Barrette. Seconded by: Callum Jr. Voice vote: All in favor.

Agenda item No. 7.c. Nov 13, 2012 4:16 PM Executive Session Meeting Minutes

- 4:18 Motion: approve and release the November 13<sup>th</sup> 2012 4:16 PM Executive Session Meeting Minutes. Made by: Barrette. Seconded by: Callum Jr. Voice vote: All in favor.
- 4:18 Motion: to adjourn. Made by: Barrette. Seconded by: Callum Jr. Voice vote: All in favor.

Respectfully submitted,

John M. Callum Jr., Clerk Board of Commissioners

Date minutes approved:

#### Tuesday November 27th, 2012, 3:00 PM Meeting

Sullivan County NH, Board of Commissioners
Regular Business Meeting

#### **Revised - AGENDA**

#### Meeting Location: Unity County Complex - Sullivan County Health Care

Sullivan County Health Care Facility – Frank Smith Living Room – 1<sup>st</sup> Floor MapQuest/Google Address: 5 Nursing Home Drive, Claremont, NH 03743

	MapQuest	doogle	Auure	55. 5 Nursing frome Drive, Claremont, Nit 05745
3:00	PM - 3:20	PM	1.	Sullivan County Health Care Administrator's Report, <i>Ted Purdy</i> a. Census b. Staffing
3:20	PM - 3:40	PM	2.	Department of Corrections Superintendent's Report, Ross L. Cunningham  a. Population Census Review b. Staffing Review
3:40	PM - 3:50	PM	3.	S.C. Conservation District – National Wild Turkey Federation Project at Marshall Pond Tract, <i>Lionel Chute</i>
3:50	PM -4:10	PM	4.	County Manager's Report, <i>Greg Chanis</i> <ul> <li>a. Biomass Project Update</li> <li>b. Public Health – Regional Network Map Update</li> <li>c. Other business: Colby Sawyer Internship Fair Wed. Mar. 6, 2013 – PH &amp; CURN Attending</li> </ul>
4:10	PM - 4:30	PM	5.	Commissioners' Report  a. Old Business  b. New Business  i. Invite to WCBH Legislative Forum Dec 6 <sup>th</sup> ii. Decide on December Meeting Dates  iii. Set Date for Next Sullivan County Criminal Justice Coordinating Committee's Meeting
4:30	PM - 4:45	PM	6.	Public Participation
4:45	PM - 4:50	PM	7.	Meeting Minutes Review a. Nov 13, 2012 Public Meeting Minutes b. Nov 13, 2012 4:00 PM Executive Session c. Nov 13, 2012 4:16 PM Executive Session
4:50	PM		8.	Adjourn Meeting

The times reflected on this agenda, other than the start time, are estimates. Actual time will depend on level of interest and participation.



#### Upcoming Events / Meetings:

Nov 29<sup>th</sup>Thu.

**Communities United Regional Network** 

**Leadership Board Meeting** 

Time:

5 PM

Place:

Claremont, NH - Valley Regional Hospital

Dec 4<sup>th</sup>Tue.

**County Board of Commissioners Meeting** 

Time:

**3 PM** 

Place:

Newport, NH - 14 Main Street, County

Commissioners Conference Room

Dec 15<sup>th</sup> Sat.

**Newport 'Twas the Night Before Christmas** 

Time:

4 PM - 8 PM

Place:

Town of Newport Main Street

#### OCTOBER 2012

MEDICARE							
	Oct 2011 Compare	Oct 2011 AVG CENSUS	Oct 2012 Actual	Oct 2012 AVG DAILY CENSUS	BUDGETED	BUDGETED AVG CENSUS	VARIANCE
CENSUS:	294	. 9	252	8	279	0	
REVENUE	\$146,774.79		\$111,631.71	i	\$132,525,00	9	-27 -\$20,893.29
AVERAGE RATE PER DAY	\$499.23	_	\$442.98		\$475.00		-\$32.02

PRIVATE							
	Oct 2011	Oct 2011 AVG		Oct 2012 AVG			
	Compare	CENSUS	Oct 2012 Actual	DAILY CENSUS	BUDGETED		VARIANCE
CENSUS:	435	14	632	20	558	18	74
REVENUE	\$108,435.00		\$163,050.00		\$142,290.00		\$20,760.00
AVERAGE RATE PER DAY	\$249.28		\$257.99		\$255.00		\$20,760.00

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	Oct 2011 Compare	Oct 2011 AVG CENSUS	Oct 2012 Actual	Oct 2012 AVG DAILY CENSUS	BUDGETED		VARIANCE
CENSUS:	3,511	113	3,295	106	3,441	111	
REVENUE	\$521,559.05		\$472,470.05		\$491,030,70		-146
AVERAGE RATE PER DAY	\$148.55		\$143.39		\$142.70		-\$18,560.65 \$0.69

HCBC (RESPITE)			T	T		T	
	Oct 2011 Compare	Oct 2011 AVG CENSUS	Oct 2012 Actual	Oct 2012 AVG DAILY CENSUS	BUDGETED		VARIANCE
CENSUS:	0	Ō	0	0	0	0	O O
REVENUE	0		\$0.00		\$0.00	<u>'</u>	\$0.00
AVERAGE RATE PER DAY	\$160.32		\$0.00				\$0.00
					\$416.67	per day rate	\$0.00
MANAGED CARE			<u> </u>		φτισ,στ	per day rate	
	Oct 2011 Compare	Oct 2011 AVG CENSUS	Oct 2012 Actual	Oct 2012 AVG	BUDGETED		
CENSUS:	Ō	02,1000	13	DAILT CERSOS	BODGETED		VARIANCE
REVENUE	\$0.00		\$4,550.00	- 4	#0.00	. 0	13
AVERAGE RATE PER DAY	\$0.00		\$350.00		\$0.00 \$0.00		\$4,550.00 \$350.00

		Oct 2011		"			
	Oct 2011	AVG					
	Compare	CENSUS	Oct 2012 Actual	į	0		
TOTAL CENSUS	4,240		4,192		\$0.00		
AVERAGE CENSUS	0.0	136.8		135.2	ΨΕ:00	138.0	

-\$14,143.94

MEDICARE B. REVENUE				
	ACTUAL	Oct 2012 Actual	BUDGETED	VARIANCE
	\$34,594.53	\$49,432.47	\$44,643,48	\$4,788,99
	\$811,363.37	\$801,134.23	\$810,489,18	Ψ-1,1 00.33
			TOTAL MONTHLY REVENUE VARIANCE	(\$9,354.95)

-\$9,354.95

Revenue Review thru 10/31/2012		123	Days		
	Annual Budget	YTD Budget	YTD	Varience	
Medicaid	5,781,491	1,948,283	1,913,867	(34,416)	
Private	1,675,350	564,570	592,557	` 27,987	
Insurance	20,000	6,740	16,928	10,188	
Respite (HCBC)	5,000	1,685	1,924	239	
Medicaid Assessment	1,418,025	354,506	313,906	(40,600)	Paid quarterly
Medicare Part B (Total)	525,641	177,134	172,220	(4,914)	
Medicare Part A	1,560,375	525,825	497,202	(28,623)	
Proshare	1,012,875			<del>.</del>	Paid at end of FY
Net Varience from Operations		3,578,743	3,508,604	(70,139)	
Misc Income	15,000	5,055	47,109	42,054	
Laundry	112,000	37,742	31,101	(6,642)	
Cafeteria	15,000	5,055	11,490	6,435	
Meals	339,164	114,294	113,350	(943)	
YTD Varience	12,479,921	3,740,889	3,711,653	(29,235)	

## Sullivan County Nursing Home Quarterly Resident Census

1,36,4

135.2

#### Resident Census - FY 13

						Residen	t Census -	FY 13								1
	TOTAL DAYS	MEDI	CAID	PRI	VATE	SKIL	LED	Н	СВС	MAN	AGED	LE	AVE	TOTAL	DAYS	Avg
	AVAILABLE		YS		YS	D/	YS	RE	SPITE	CA	RE	D,	AYS	FILL.	ED	Census
	4836	3353	78,19%	559	13.04%	339	7.91%	5	0.12%	29	0.68%	3	0.07%	4288	88.67%	
Jul-12	4836	3374	78.74%	633	14.77%	265	6.18%		0.16%	6	0.14%	0	0.00%	4285	88.61%	]
Aug-12	.,,		79.78%	610	15.36%	188	4.73%		0.00%	0	0.00%	5	0.13%	3972	84.87%	1
Sep-12	4680	3169			14.36%	792	6.31%		-0:10%	935N	Q.28%	# 8	0.06%	12,545	87.41%	1,36.
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	AVAILABLE		YS		AYS	D/	YS	RE	SPITE	CA	RE	D,	AYS	FILL		Census
Jul-11	4836	3589	85.60%	483	11.52%	112	2.67%	7	0.17%	0	0.00%	2	0.05%	4193	86.70%	]
	4836	3626	87.21%	494	11.88%	30	0.72%	5	0.12%	0	0.00%	3	0.07%	4158	85.98%	
Aug-11	4680	3462	87.12%	419	10.54%	89	2.24%	0	0.00%	0	0.00%	4	0.10%	3974	84.91%	
Sep-11	1614:352	10.677	86.63%	1,396	11,133%	2316	# 1187%	12%	0010%	0.5	0.00%	9	0.07%	12,325	85,88%	134.0
Oct-11	4836	3512	82.83%	432	10.19%	294	6.93%		0.00%	0	0.00%	2	0.05%	4240	87.68%	1
Nov-11	4680	3380	81.98%	409	9.92%	333	8.08%	0	0.00%	0	0.00%	1	0.02%	4123	88.10%	
Dec-11	4836	3526	82.29%	417	9.73%	340	7.93%	0	0.00%	0	0.00%	2	0.05%	4285	88.61%	
	l		82.37%	1,258	9.95%	2967	7.65%	1/10/2	0.00%	110 H	0.00%	5.	0.04%	12,648	.88.13%	137.5
2ND QUARTER Jan-12	4836	3491	83.32%	414	9.88%	273	6.52%	0	0.00%	12	0.29%	0	0.00%	4190	86.64%	1
Feb-12	4524	3272	82.96%	431	10.93%	239	6.06%	0	0.00%	0	0.00%	2 .	0.05%	3944	87.18%	
Mar-12	4836	3413	80.61%	544	12.85%	252	5.95%	6	0.14%	16	0.38%	3	0.07%	4234	87.55%	
Hard QUARTER		10,176		1,389	11,23%	764	6:18%	6	0.05%	28	0.23%	1 5	0.04%	(12,368)	87,12%	135,9
Apr-12	4680	3248	80.72%	513	12.75%	230	5.72%		0.00%	30	0.75%	3	0.07%	4024	85.98%	_
May-12	4836	3333	80.49%	539	13.02%	236	5.70%	0	0.00%	31	0.75%	2	0.05%	4141	85.63%	1
Jun-12	4680	3110	76,77%	577	14.24%	332	8.20%	0	0.00%	30	0.74%	2	0.05%	4051	86.56%	
CONTRACTOR OF THE PROPERTY OF	Commence Superposition of		979,33%		13.34%	1728	6.54%	<b>[[ 0</b> j j	0.00%	91	0.74%	17	0.06%	2,216	86:05%	134.2
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FY '12 TOTAL	57,096	40,962	82.66%	5,672	11.45%	2,760	5.57%		0.04%	119	0.24%	26	0.05%		86,80%	
GO TOTAL						WHY.	<b>施拉斯</b>	網網器			10000					
	48-57-13-24-14-15-15-15-15-15-15-15-15-15-15-15-15-15-	111.9	a parametrial de marco	15.5		7,5		0.0		0.3	<u> </u>	0.1		135.4	L	_
YTD AVG.		111.9	<u> </u>	15.5	1	1,3	<u></u>	1 0.0		1 3.0					.1	_

#### Medicare Length of Stay Analysis

Sullivan County Health Care (SC)

Page 1 of 1 11/20/2012 12:10 PM AR7400A

	Oct 2012	Sep 2012	Aug 2012	Jul 2012	Jun 2012	May 2012	Apr 2012	Mar 2012	Feb 2012	Jan 2012	Dec 2011	Nov 2011	12 Mos.	Calendar YTD
Total Admits & Readmits (All payer types)	16	3	10	16	11	12	10	11	5,	11	10	9	124	105
MCR # Admits & Readmits	10	2	5	10	9	7	8	8	3	9	8	6	85	71
MCR # Discharges from facility  MCR Discharged LOS	<b>2</b> 9.5	3 35.7	5 55.8	2 36.0	4 35.5	2 32.5	7 22.9	3 32.7	1 31.0	5 43.2	5 14.0	2 49.0	41 33.1	34 35.0
MCR # End or A/R Change	5	2	2	9	5		4	5	5	3	5	3	48	40
MCR End or A/R Change LOS	39.2	11.5	22.5	41.0	42.0		40.3	41.4	35.6	42.3	52.2	36.3	39.3	37.9
Total Average MCR LOS	30.7	26.0	46.3	40.1	39.1	32.5	29.2	38.1	34.8	42.9	33.1	41.4	36.4	36.6
Total MCR Days	252	188	265	339	332	236	230	252	240	273	340	333	3280	2607
Rehab RUGs % of Total MCR Days	245 97%	177 94%	263 99%	328 97%	321 97%	227 96%	223 97%	249 99%	237 99%	271 99%	330 97%	333 100%	3204 98%	2541 98%
Non-Rehab RUGs % of Total MCR Days	7 3%	11 6%	2 1%	11 3%	11 3%	9 4%	7 3%	3 1%	2 1%	2 1%	10 3%		75 2%	65 2%
Default Days % of Total MCR Days														
A ADL (low dependency) % of Total MCR Days	125 50%	57 30%	89 34%	173 51%	147 44%	71 30%	122 53%	109 43%	120 50%	164 60%	170 50%	150 45%	1497 46%	1177 45%
B ADL (medium dependency) % of Total MCR Days	71 28%	78 41%	124 47%	109 32%	125 38%	69 29%	44 19%	72 29%	48 20%	64 23%	90 26%	41 12%	935 29%	804 31%
C ADL (high dependency) % of Total MCR Days	56 22%	53 28%	52 20%	57 17%	60 18%	96 41%	64 28%	71 28%	71 30%	45 16%	80 24%	142 43%	847 26%	625 24%
Medicare Net Revenue	\$111,632	\$90,180	\$134,783	\$160,608	\$151,884	\$11 <b>1</b> ,050	\$105,146	\$115,946	\$111,723	\$123,133	\$157,881	\$159,233	\$1,533,199	\$1,216,08

Note: This report includes only the selection criteria listed below. Effective Date From 10/1/2012 Thru 10/31/2012 Status: All

Sort: AR Type

#### Summary Admission / Discharge Report

Page 1 of 2 11/20/2012 12:13 PM R16300B

Sullivan County Health Care (SC) Admissions (Includes Readmits)

A/R Type	From/To	Admissions	Readmits	Discharges
INS	HM Home	0	0	0
1140	HP Hospital	1	0	0
	INS Subtotal	1	0	0
MCD	1 Private home/apartme	1	0	0
IVICD	20 Expired in Facility	0	0	1
	AL Assisted Living	0	0	0
	HM Home	1	0	0
	HP Hospital	0	2	4
	MCD Subtotal	2	2	5
MDA	HM Home	0	0	0
MRA	HP Hospital	8	2	2
	MRA Subtotal	8	2	2
DVT	HM Home	1	0	0
PVT	PVT Subtotal	1	0	0
	Total	12	4	7

Note: This report includes only the selection criteria listed below. Effective Date From 7/1/2012 Thru 10/31/2012

Status: All Sort: AR Type

#### Summary Admission / Discharge Report

Page 1 of 2 11/22/2012 12:52 PM RI6300B

Sullivan County Health Care (SC) Admissions (Includes Readmits)

A/R Type	From/To	Admissions	Readmits	Discharges
НСВ	HM Home	1	1	2
. 100	HCB Subtotal	1	1	2
	HM Home	0	0	0
INS	HP Hospital	1	1	1
	INS Subtotal	1	1	1
			0	0
MCD	1 Private home/apartme	1	0	0 1
	20 Expired in Facility	0	0	0
•	5 Acute care hospital	1	O O	0
	AL Assisted Living	2	0	6
	EX Expired	0	0	
	HM Home	1	1	2
	HP Hospital	1	2	9
	MCD Subtotal	6	3	18
MRA	1 Private home/apartme	0	0	0
	5 Acute care hospital	2	0	0
	EX Expired	0	0	1
	HM Home	0	0	7
	HP Hospital	13	11	3
	NH Nursing Home	1	0	1
	MRA Subtotal	16	11	12
PVT	1 Private home/apartme	1	0	0
rvi	20 Expired in Facility	0	0	0
	5 Acute care hospital	0	0	0
	AL Assisted Living	1	0	0
	EX Expired	0	0	2
	HM Home	1	0	0
	HP Hospital	0	2	4
	HP Hospital PVT Subtotal	3	2	6
	· Total	27	18	39

 $A \cap$ 

11/20/12 12:06 PM

## Sullivan County Health Care (SC) For the Month of Oct, 2012

Resident (Res#)	(Discharge Date)													
Type Balance	Oct/	Sep/	Aug/	Jul/	Jun/	May/	Apr/	Mar/	Feb/	Jan/	Dec/	Nov/	Oct/	Balance
Aged Analysis	Summary .								•				4 000 00	4 700 00
HCB			1,122.24	801.60				961,92					1,896.32	4,782.08
INS	22,102.50	20,231.06	14,347.42	25,823.39	24,841.91	26,318.09	17,065.51	19,548.46	5,140.10	10,168.95	1,350.02	3,565.57	25,163.92	215,666.90
MCD	378,162.98	16,080.21	13,300.02	24,939.54	12,784.76	19,863.73	11,504.90	6,053.31	3,119.29	6,274.54	3,871.98	4,593.59-	62,997.95	554,359.62
MCP														107.010.70
MRA	91,690.71	29,098,08	4,999.62	6,918,15	13,960.05	10,858.37	12,414.59	770.52	44.30	60.07			5,795.76-	165,018.70
MRB	39,546.05	4,361.54	2,742.32	213,75	1,263,31	6,540.61	3,104.90	. 225.73	439.42	1,124.12	644.96	2,043.35	13,585.04	75,835.10
MXA	4,442.23	6,701.33	937.48-	289.40	2,317.48		2,649.50	19.00-	19,00-	5,472.00	3,350.54	1,415.00	2,426.24-	23,235,76
MXB	3,956.98	3,278.96	941.15-	584.79-	197.34-	519.90	114.30-	656.33-	422.81-	155,26	575.72	499.17	1,249.47~	4,819.80
PVT	67,441.83	12,980.07	37,611.50	22,635.33	15,680.00	20,354.99	22,301.50	21,317.68	4,960.48	1,939.48	5,880.00	20,705.01	91,040.29	344,848.16
RES	174.94	3,126.19-	6,863.42	2,305.82	1,024.96-	1,604.50	2,156.20	6,516.81	2,522.98	2,020.02	551.72-	16.70	2,536.91-	· 16,941.61
PHC													375.00-	375.00-
HST														
PIN						•	•							
HSR														
Totals:	607,518.22	89,605.06	79,107.91	83,342.19	69,625.21	86,060.19	71,082.80	54,719.10	15,784.76	27,214.44	15,121.50	23,651.21	182,300.14	1,405,132.73
	43.24%	6.38%	5.63%	5.93%	4.96%	6.12%	5.06%	3.89%	1.12%	1.94%	1.08%	1.68%	12.97%	100.00%





#### Sullivan County Department of Corrections 103 County Farm Rd Claremont, NH 03743

#### Intra-Department Memorandum

From:

Sergeant S. Coughlan

Date:

November 27th, 2012

Subject:

Daily Report

At:

Classification Department

To:

Superintendent Ross L. Cunningham

#### POPULATION DATA:

**House of Corrections** 

**Pre-Trial Inmates** 

**Protective Custody** 

**Home Confinement** 

Male - 38

Male – 8

Male – 0

Male - 9

Female –9

Female - 0

Female - 0

Female - 2

Total In-House Population: 55

(Home Confinement – 11)

In-House Population on 11/27/2011 - 86

Unit Breakdown (included in the above count):

Unit 1 - 0

Male Flex - 12

Female Flex - 5

Unit 2 - 0

Male Treatment - 14

Female Treatment – 2

Unit 3 – 13

Male Work Release - 6

Female Work Release - 2

OBS-1

Jail Total: 14

CCC Total: 41

#### **CENSUS DATA:**

**Cheshire Cty** 

Belknap Cty

Carroll Cty

Weekender

Male – 1

Male - 1

Male - 0

Male - 0

Female - 0

Female - 0

Female - 0

Female - 0

Hillsbor. Cty

NHSP/SPU

Merrimcak Cty

Male - 0

Male - 8

Male – 4

Female - 0

Female - 0

Female - 0

**Total Census Population: 80** 

Census Population on 11/27/2011-110

#### Individuals Housed at SCDOC for other Facilities:

Individuals seen by P&P prior to release:

4 Males from NHSP

Males - 0

Females - 0

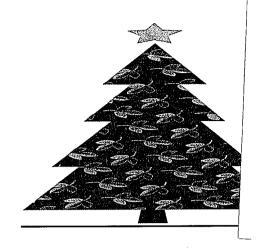
1 Male from Cheshire County Doc

Pre-Trial Services Program – Total: 17

Male - 14

Females - 3

Agundant 2.



# INMATE HOLIDAY EVENT Thursday, December 20, 2012

A holiday event will be held for the children of the inmate population. Those children that may participate are ages 1 month to 18 years old. They must be an immediate relative (child, stepchild or child living with an inmate). The inmate may have the children as well as **ONE** visitor attend the event. There will be a gift for each child attending. To ensure that gifts are bought and wrapped, requests have to be on by 12/13/12. The following times are as follows:

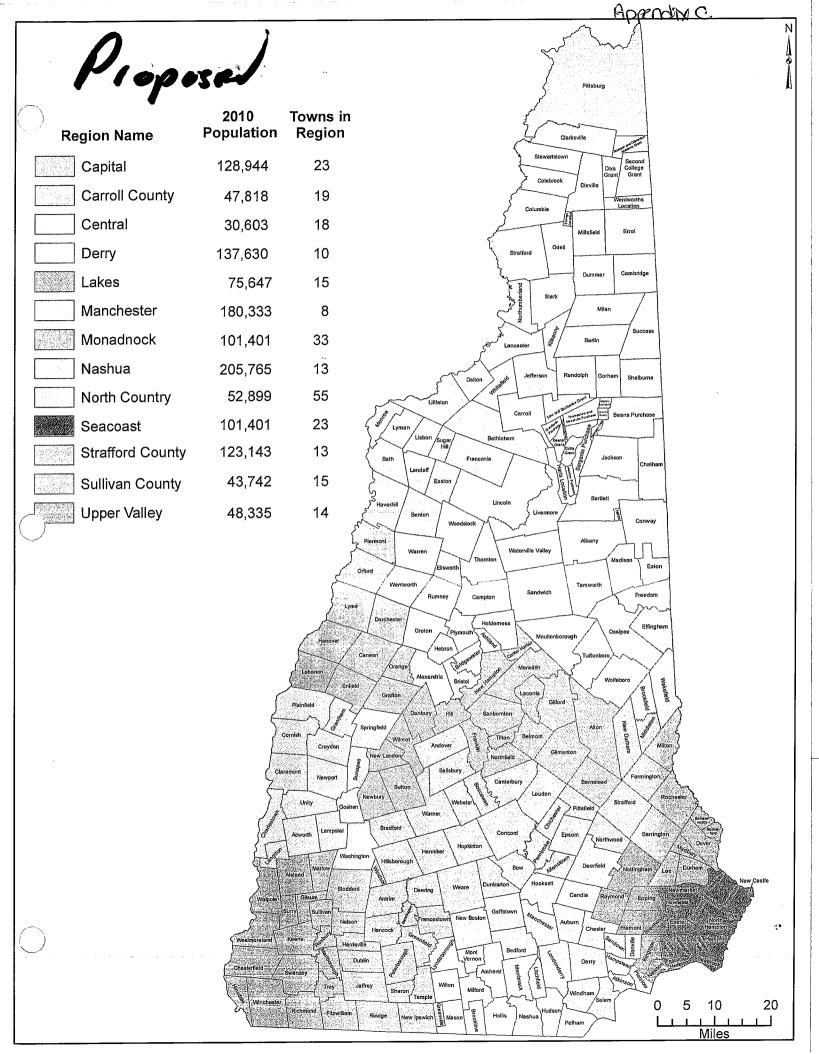
4:00 PM to 5:00 PM - JAIL (Unit 3) Male Inmates

5:30 PM to 6:30 PM - JAIL (Unit 1) Male inmates

6:45 PM to 7:45 PM - CCC/Male Inmates

8:00 PM to 9:00 PM - CCC/Unit 2 Female Inmates

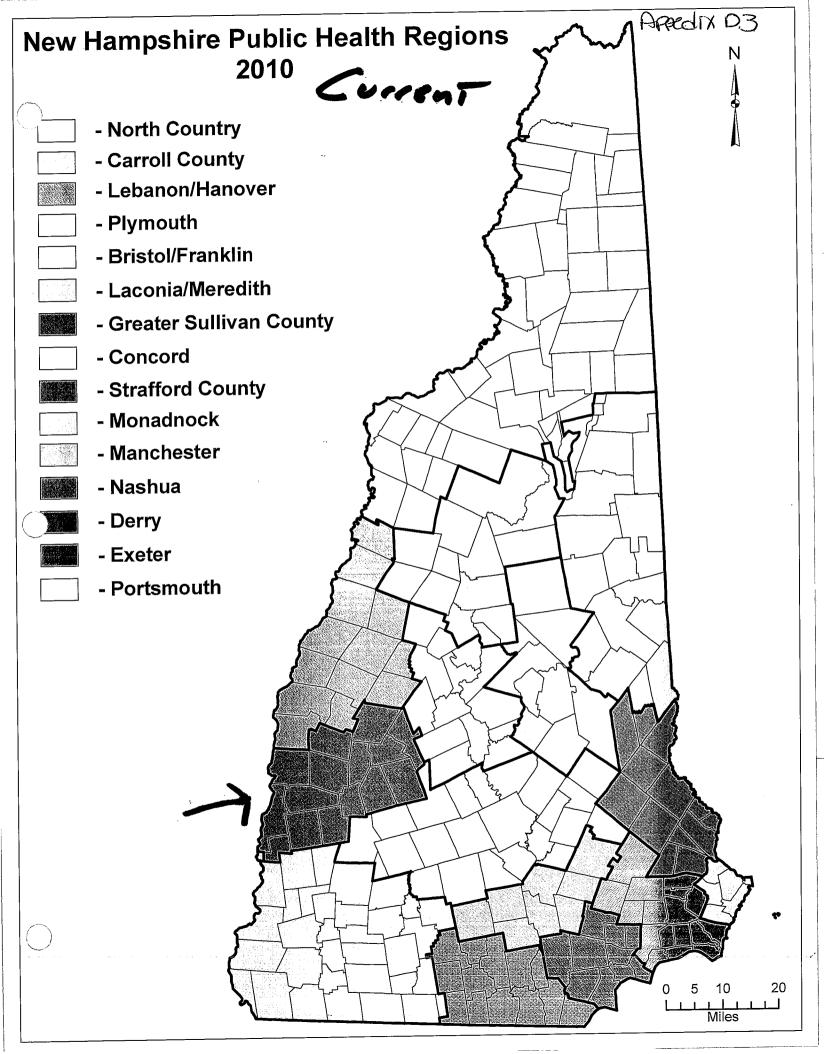
If you have questions, refer them to Jane Coplan, Program Director on an Inmate Request Slip.



Appendix D.1 **New Hampshire** Regional **Networks** Region A North Country Regional Network Coment Region C Region B Lakes Region Mount Washington Valley Lower Grafton County Regional Network Regional Network Region D Sullivan County Regional Region F <u>Region E</u> Southeastern Capital Area Regional Regional Network Region H Greater Manchester Regional Network Greater Rockingham County Regional Network Monadnock Region I Greater Nashua Regional Network

# COMMUNITIES WITHIN NEW HAMPSHIRE REGIONAL NETWORKS

MARCON   M	A NORTH COUNTRY REGIONAL NETWORK	B LOWER GRAFTON COUNTY REGIONAL NETWORK	C LAKES REGION / MOUNT WASHINGTON VALLE REGIONAL NETWORK	D SULLIVAN COUNTY REGIONAL NETWORK	E CAPITAL AREA REGIONAL NETWORK	F SOUTHEASTERN REGIONAL NETWORK	G MONADNOCK REGIONAL NETWORK	H GREATER MANCHESTER REGIONAL NETWORK	I GREATER NASHUA REGIONAL NETWORK	GREATER ROCKINGHAM COUNTY REGIONAL NETWORK
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# Overview of a New Regional Alignment to Provide Public Health and Substance Abuse Prevention Network Services

November 20, 2012

NH Bureau of Drug and Alcohol Services NH Division of Public Health Services

## Agenda

- 1:00 1:10 Welcome and Introductions Joe Harding, NH Bureau of Drug and Alcohol Services and Lisa Bujno, NH Division of Public Health Services
- 1:10 1:50 Review of the process to develop the new regions and stakeholder input process Valerie Morgan, NH Bureau of Drug and Alcohol Services Review of the development of Regional Public Health Network regions Neil Twitchell, NH Division of Public Health Services
- 1:50 2:00 Perspective from: NH Charitable Foundation and Governor's Commission, Tym Rourke
- 2:00 2:20 Questions and Answers Joe Harding, NH Bureau of Drug and Alcohol Services and Lisa Bujno, NH Division of Public Health Services
- 2:20 2:30 Public comment process Neil Twitchell, NH Division of Public Health Services

# Stakeholder Input Process

- Held 16 key informant interviews with current Public Health Network and Regional Network fiscal agents
- Two facilitated group conversations with both Public Health and Regional Network Coordinators
- Input from a total of 45 stakeholders

## **Current Alignment Themes**

- Both federal funders and contracts require sector engagement (11 PH and 6 BDAS)
- Many regions have varying degrees of coordination
- Clear preference for consistent regional boundaries
- Several have well organized oversight entities for the region
- Strong support for shared oversight structure
- Universal support for topic-specific committees
- Many leverage community partnerships and attending each others meetings

# Overall Challenges

- · Some regional work is currently siloed
  - even with the same fiscal contractor
- Some regions convened same stakeholder agencies but with different people
- Some regions have completely separate membership
  - no coordination of effort
- Some fiscal agents were unsure how they would operationalize an aligned contract
- Concerns expressed, changes would disrupt current partnerships

## **Opportunities**

- Most saw the benefits and some administrative efficiencies to be gained
- Willingness to make this work
- · Recognized there would be some temporary disruptions
- Most agreed by working together will minimize disruptions
- Working together across boundaries during transition phase
- Regional data collection and planning would work best within <u>one</u> geographic boundary

# What We Considered

- Consideration given to alignment with:
  - Current regions used for BDAS Regional Networks
     & DPHS Public Health Networks
  - School Administrative Units
  - Hospital Service Areas
  - Counties
  - Town where regional high schools are located
  - Population
  - Number of communities served

# Why These?

- Current RN / PHN regions: Current service areas; partner relationships & investments
- School Administrative Units: Primary intervention point for RNs; indicator of relationships between communities and people
- Hospital Service Areas: Significant financial support for community health programs; key to medical response during emergencies; surrogate for how the public accesses health/human services; surrogate for other commercial/economic activity
- Counties: Political and statutory recognition; fosters governmentally based public health services

# Why These?

- Town where regional high schools are located:
   "Key" towns when considering regional assignment
- Population: Current wide disparities between regions; surrogate for coordinator workload; factor for any formula-based funding streams; factor in meaningful epidemiologic / assessment work
- Number of communities served: Current wide disparities between regions; surrogate for coordinator workload; potential factor for some formula-based funding streams

- How important is alignment with County boundaries?
  - Difference between networks now housed in county government and those that are not?
  - Is "close" good enough based on SAUs, HSAs, current regions?
  - Difference in importance over short-term vs. longterm?

- How important is alignment with SAUs?
  - What impact from frequent changes in alignment?
  - What impact form situation where many towns send students to more than one middle/high school?
  - Is "close" good enough based on HSAs, counties and current regions?
  - Is the town where the school is located the most important to defining regional boundaries?

- How important is alignment with HSAs?
  - Difference in the degree of importance between preparedness and prevention work?
  - How good a surrogate are HSAs in reflecting enabling conditions for mobilizing partnerships and linking people to services?
  - How important are they with respect to enabling monitoring health status/identifying health problems and health improvement planning?
  - How supportive with respect to the integration of public health and health care?

- How important are the total population and/or the number of towns in a region?
  - Are they good surrogates for "workload"?
  - What degree of impact on the ability to detect changes in health status; disease trends; risk behaviors?
  - What impact on funding decisions from any funding source?
    - Significant under most formula based funding models
    - Less significant, but likely still important when same level of funding provided to each region
    - Enabling for funding based on 2 or 3 "tiers"?

## **Outcomes**

- Alignment with Counties
  - 30% (N=3) with 1-1 alignment (Carroll, Strafford,
     Sullivan)
  - − 30% (N=3) where an entire county is within a larger region (Belknap, Cheshire, Coos)
  - 40% (N=4) where county is aligned with more than
     1 region (Grafton, Hillsborough, Merrimack,
     Rockingham

## **Outcomes**

- Alignment with SAUs
- Currently 86 SAUs Statewide 82% are aligned within a single region (N = 71)
  - -18% are aligned with more than one region (N = 15)
    - 13 of 15 aligned with two regions
    - 2 of 15 aligned with 3 regions

## **Outcomes**

- Alignment with HSAs
- 22 HSAs statewide
  - 50% HSAs (N=11) aligned within a single region
  - 45% HSAs (N=10) aligned with two regions
  - -5% HSA (N=1) aligned with three regions

## Conclusions

- Most significant realignments reflect primary concerns raised by partners
- Other realignments usually of 1 or 2 towns reflect assessment of county/SAU/HAS
- When not 100% aligned by HSA or SAU many of the variations are small

## Conclusions

- There is no one "perfect map" for NH
- Both DPHS and DBHCS believe this alignment responds to community input and supports community-based work
- There are no "Iron Curtains" between regions
- Ongoing work requires cross-regional collaboration

## **Public Comment Process**

- Agencies accepting written comments only
- Form for comments distributed to attendees on November 22 (be sure to give us your e-mail address today)
- Accepting comments until 4:00PM, Nov. 30
- Return electronically to:
  - Sinda Ullstrup

Bureau of Drug and Alcohol Services

Send to: sullstrup@dhhs.state.nh.us

#### **Sharon Callum**

From: Sent:

To:

Cc:

Jessica McAuliff <phn@sullivancountynh.gov>

Tuesday, November 20, 2012 4:57 PM

gchanis@sullivancountynh.gov; 'Thomas de Masi'; 'Sharon Callum';

aiken\_tom@yahoo.com; 'Amy Cullum'; 'Bob Cunniff'; 'Carla Skinder'; 'Chad Denning';

'Charles Baraly'; charlestownfire@comcast.net; 'Chief Ed Smith, Charlestown'; 'Christopher Rowe'; 'Dale Girard'; 'Danielle Morse'; dedkins@charlestown-nh.gov; dfbent@tds.net; DoCurral, Mike; donna@town.sunapee.nh.us; 'Drewniak, Pamela ';

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'Lizabeth Hennig'; 'Bridgett Taylor'; 'Chris Christopoulos'; Steve.Allen@lebcity.com;

mrc@sullivancountynh.gov

IMPORTANT: New Regional Alignment to Provide Public Health and Substance Abuse **Subject:** 

Prevention Network Services

Map Realignment Presentation FINAL 11-20-12.ppt; Regional Public Health Networks **Attachments:** 

SFY 2014.pdf; Public Comment Regional Alignment form.doc

Importance:

High

#### IMPORTANT NEW INFORMATION:

1. NEW MAP - ATTACHED: I have just returned from a State meeting, with big implications for our Public Health regions, and our Substance Abuse Prevention regions. The state has re-done our maps. The new region maps for July 1 2013 have been completed and released today at this meeting. (ATTACHED) The new map has moved 4 towns - New London (and NLHospital), Sutton, Wilmot, & Newbury, to the "Upper Valley" public health region, and has added towns to align our boundaries with Sullivan County. The goal is to align the public health regions with the substance abuse prevention network regions. Therefore new regional boundaries have been created affecting both. The audience of this email focuses on the public health preparedness network's partners.

- 2. IMPLICATIONS FOR PUBLIC HEALTH REGION: For public health preparedness purposes, this means that the Mount Sunapee POD (point of dispensing) in Newbury, and the New London ACS/NEHC (alternate care site and neighborhood emergency help center), agreements with Colby Sawyer College, agreements for shelter planning assistance, and our supply MOUs etc. would all be coordinated through the Upper Valley, not Greater Sullivan County PHN. Other issues to consider may include: ownership of the shelter/ACS supply trailer and all of its cots and oxygen concentrators; how will the VNA role change; how does it affect the medical reserve corps, .to name a few.
- 3. REASONING: We suspect the reasoning had something to do with the I 89 corridor, but we are not informed of the State's specific reasoning for the change, at this point.
- 4. STATE GIVES OPPORTUNITY FOR PUBLIC COMMENT: Instructions are below, and a form is attached, to submit a written public comment on this map, before Nov 30, 2012.

4. POSSIBLE PROPOSAL: ASK TO KEEP THE 4 TOWNS IN WITH SULLIVAN COUNTY

REGION: When we chatted briefly after today's state meeting, Liz Hennig and I concluded that when we write our formal public comment for submission to the State, it may be desirable to ask for these four towns [again, New London, Sutton, Wilmot and Newbury] to remain a part of the Sullivan County public health planning region.

5. YOUR FEEDBACK? Partners, how do you feel about this, preliminarily?

There are many reasons pro and con that we could list. Please take a moment to think about this. We would like to coordinate forming a statement that we can formally submit, 'from' a collective of partners for our public comment.

Please email with your thoughts, or call me any time. If regional partners would like to chat via conference call prior to submitting our public comment statements, we are happy to arrange this too. You may also individually submit your public comments using the form attached.

Liz Hennig and I plan to meet with fiscal agent Greg Chanis next Monday or Tuesday, and we would like to write out our public comment at that time, and submit via email as the procedure requires.

Thank you, Jessica McAuliff

Jessica R. McAuliff, MPH, CHEP
Regional Coordinator,
Greater Sullivan County Public Health Network & Director, Medical Reserve Corps Unit #1558
Cell (603) 398-2222
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"Luck tends to come to those who prepare." - Colin Powell

Visit www.nh.gov/readynh to learn how to prepare for an emergency today!

Please consider the environment before printing this e-mail.

----Original Message----

From: JSouthwick@dhhs.state.nh.us [mailto:JSouthwick@dhhs.state.nh.us]

Sent: Tuesday, November 20, 2012 3:56 PM

To: DPHS-BDAS\_RFP\_Meeting\_11-20-12.DHHS@dhhs.state.nh.us

Cc: DViger@dhhs.state.nh.us; Brett.Scholbe@dhhs.state.nh.us; Paul.Deignan@dhhs.state.nh.us; jstewart@jsi.com; mbradley.jsi@dhhs.state.nh.us; amy\_cullum@jsi.com; dnaro@cadyinc.org; katy\_shea@jsi.com; llafave@jsi.com; jwozmak@co.cheshire.nh.us; LBujno@dhhs.state.nh.us; aghosh@jsi.com; sfriedrich@jsi.com; alice.ely@mvhi.work; LBlair@dhhs.state.nh.us; SWeld@dhhs.state.nh.us; SUllstrup@dhhs.state.nh.us

Subject: Overview of New Regional Alignment to Provide Public Health and Substance Abuse Prevention Network Services

As promised, attached below you will find the power point presentation from today's meeting, the new map, and the Public Comment Form. Deadline for the completion of this form is November 30th. Please send the completed one page form to Sinda's attention at sullstrup@dhhs.state.nh.us . Thank you.

(See attached file: Map Realignment Presentation FINAL 11-20-12.ppt)(See attached file: Regional Public Health Networks SFY 2014.pdf)(See attached file: Public Comment Regional Alignment form.doc)

Janice Southwick
Executive Secretary
Community Health Development Section
Bureau of Public Health Systems, Policy & Performance NH Division of Public
Health Services Department of Health and Human Services
29 Hazen Drive
Concord, NH 03301-6504

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New Hampshire Division of Public Health Services, Improving Health, Preventing Disease, Decreasing Costs for All

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#### WEST CENTRAL BEHAVIORAL HEALTH

AFFILIATE OF THE DEPARTMENT OF PSYCHIATRY, GEISEL SCHOOL OF MEDICINE AT DARTMOUTH

## Annual Legislative Forum December 6, 2012

West Central Behavioral Health's Board of Directors invites you to breakfast at The Common Man Restaurant on December 6, 2012 for our fifth annual Legislative Forum. We hope you are available to join board members, executive staff and medical staff as we share information with legislators about the essential mental health services provided to residents of southern Grafton and Sullivan counties by West Central Behavioral Health.

Fifth Annual Legislative Forum
Thursday, December 6, 2012
8:30 to 10:30 am
The Common Man Restaurant
12 Water Street
Claremont, NH 03743

Please RSVP by December 2 to Heidi Postupack at HPostupack@wcbh.org (603) 448-0126 ext 2100